Indiana State Police Methamphetamine Laboratory Occurrence Report This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	03-02-2008	Address:	CR 1200 N. approx.
Case #:	16-17886		100 ft. (E) of SR 19
County:	Miami (52)		
	boratory Seizure (check one)	Seizure Location (c	heck all that apply)
☐ Operatio ☐ Chemica ☑ Dumpsit	al/Glassware/Equipment (only)	Residence Outbuilding Vehicle	☐ Hotel/Motel ☑ Open No Structure ☐ Other:
Items Found: Location (bedroom, kitchen, open air, etc)			
(check all that apply) Lithium/Ammonia Reaction(s):			
Red Phosphorous/Iodine Reaction(s):			
☐ Flammable Solvents:			
Water Reactive Metal (Lithium):			
Anhydrous Ammonia: outdoors			
Hydrochloric Acid Gas Generator(s):			
Corrosive Acid:			
Corrosive Base:			
Other (item and location):			
Child under age 18 discovered (check one) Yes (number present) No *If yes, fax report to Child Protective Services		Investigative Information Ephedrine/Pseudoephedrine Tracking Log Retail/Merchant Tip Other:	
This report is to be faxed to the following agencies that serve the location:			
Fire Departs	tment: Macy Fire Dept. Fax: 765-472-5191		
Health Department: Miami County		Fax: <u>765-4'</u> Fax: <u>N/A</u>	<u>/3-0285</u>
Child Protec	ction Service: N/A		
For further information regarding this methamphetamine laboratory, contact Investigating Officer: <u>T.J. Zeiser</u> Phone <u>765-473-6666</u>			

- This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.
- This form is to be included with the case file, and a copy sent to the Clandestine Laboratory Team Leader for retention.